

Docket No: 2787 (203-3103 PCT US)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT(S): Frank J. Viola                      EXAMINER: Julian W. Woo

SERIAL NO.: 10/510,165                      GROUP: Art Unit 3773

FILED: October 1, 2004                      DATED: September 25, 2009

TITLE: SURGICAL CLIP APPLIER WITH HIGH  
TORQUE JAWS

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT TRANSMITTAL FORM**

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Applicant claims small entity status of this application under 37 C.F.R. 1.27
- ☐ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)		SMALL ENTITY		OTHER THAN A
	CLAIMS		HIGHEST	PRESENT		RATE	OR	SMALL ENTITY
	REMAINING		NUMBER	EXTRA		ADDL.		ADDL.
	AFTER		PREVIOUSLY			FEES		FEES
	AMENDMENT		PAID FOR					
TOTAL	* 34	MINUS	** 30	= 0	x 26 <sup>1</sup>	\$		x 52 <sup>2</sup> = \$208.00
INDEP.	* 5	MINUS	*** 5	= 0	x 110 <sup>3</sup>	\$	OR	x 220 <sup>3</sup> = \$
					x 195 <sup>4</sup>	\$		x 390 <sup>4</sup> = \$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					TOTAL	\$ 0.00		TOTAL \$208.00

- \* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
- \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 20, write "20" in this space.
- \*\*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" in this space is less than 3, write "3" in this space. The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior amendment or the number of claims originally filed.

**CERTIFICATE OF TRANSMISSION UNDER 37 C.F.R. §1.8(a)**

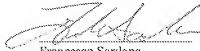
I hereby certify that this correspondence is being transmitted on the date below with the United States Patent and Trademark Office, PO Box 1450, Alexandria, VA 22313-1450, via electronic submission.

Dated: September 25, 2009

  
Julia Yanopoulos

- ☐ Please charge Deposit Account No. 21-0550 in the amount of \$208.00. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$        is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 21-0550. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 21-0550 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



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